



MAY 1999

# CLINIC CRIER



Volume 5 Issue 1

## From the Commanding Officer:

It doesn't seem possible that we are ending another academic year with spring and '99 commissioning week activities. There are nearly 1000 future Navy and Marine Corps officers that will enter the fleet with first-hand knowledge of the Navy-Marine Corps health care team. Thanks to each one of you for your leadership!

Maintaining exceptional Customer Service (internal and external), access to Quality care, and maintaining Operational Readiness remain our focus. Do a self-assessment: Are we professional on the phone, or providing timely recognition and evaluation feedback to our personnel? Are we trying to remove those barriers and "hassle factors" for our patients to gain access to our high quality professional staff and services? What outcomes can we analyze in making performance improvements in the way we do business? Remember TRICARE is not a special project—it is our health benefit.

Are we up to date in military and operational training and required medical/dental exams? We continually seek to improve our performance, so let's capitalize on our talent, expertise and NMCLA team! We are beginning preparation for a Medical Inspector General inspection; LCDRs Kennerly and Paserb and

LTJG Wang are spearheading this effort through the directors. There will be many opportunities to be involved in the preparation.

There are personnel and organizational changes coming within the clinic with new personnel and TAD support. The item that comes through loud and clear at CO Calls is communication—talking to each other doesn't require additional equipment and \$!☺ Continue to look for opportunities to highlight our services—the 14 May Health Fair and the commissioning week MSTs highlight our community involvement.

A special thanks to Lynne Towle for her tireless efforts as the NMCLA Ombudsman—the Towles are Hawaii bound! Welcome Lisa Lane to this important command position—we all look forward to working with her. Also, Captain JoDee Jacob, the USNA Deputy for Operations is on her way to GUAM as the Base Commanding Officer. We will miss her enthusiastic and loyal support of Medical and welcome CAPT Martha McWatters.

Please continue to take care of each other as shipmates!

V/R  
CO



## Ombudsman's Corner

### New Ombudsman's first words

Greetings Family members and Staff of the Naval Medical Clinic Annapolis,

I would like to take this opportunity to introduce myself. My name is Lisa Lane. I am both pleased and honored to be selected as your new ombudsman for the Naval Medical Clinic, Annapolis. My husband is a Radiology Technologist and we have been at the command for two years. Sean and I have been married for 7 years now and have a daughter named Emily. She will be three this May. We have been stationed on both coasts and endured one full deployment (a WestPac in '93), as well as several temporary separations that are just "hazards" of the occupation." I know I have big shoes to fill in replacing Mrs. Lynne Towle as she and her family prepare for yet another PCS to the arduous and demanding duty station of Hawaii (Sounds just terrible, doesn't it?). I hope that I can be of assistance to anyone who needs it. I would just like to take the next few minutes to refresh everyone's memory on what exactly an "Ombudsman" is.

An ombudsman is a special assistant to the Commanding Officer, in order to act as a liaison between the service members' families and the command. We communicate information in the case of deployments of staff members (USNS Comfort TAH-20), community information, and available community resources. I will also help new incoming families find out information about the command and where to find the answers to questions that I cannot answer. I will also use the column in the "Clinic Crier" to relate

Continued on page3

## Contents:

New Ombudsman's First Thoughts  
Exercise Anyone?  
More Shipmates Highlighted  
Health Fair Coming to NMCL Annapolis

Cover Page  
Page 2  
Page 3  
Back Page

# Medical Minute

## Exercise Anyone???

A common situation arises in the medical clinic at hospital point. The health care provider says that the individual is overweight and the patient readily agrees. The ensuing discussion centers around the complications of being overweight including heart disease, hypertension, and diabetes. Both parties feel that something needs to be done. Now the debate begins. Some individuals are ardent followers of fad diets (Mayo clinic etc.), while others have initiated Mau Huang from the local GNC. Yet most still on active duty are placed in the remedial PT program and exercise until their shins splint. The prevailing conventional wisdom would say that a combination of diet and exercise is the best prescription for success.

Now, for the million dollar question: Which diet and which exercise program? The diet part I'm going to leave alone for now since the title of this article is regarding exercise. The only recommendation I have is whatever diet you choose, make sure it is a program that you can stick to in the long run. Medical science has determined that there is probably a "set point" for weight in the hypothalamus that is programmed in during the teen years. It is largely influenced by genetics but can be effected by environmental influences. If you decide to "reset" the hypothalamus, it requires long term behavioral changes (i.e. sticking to a dietary plan).

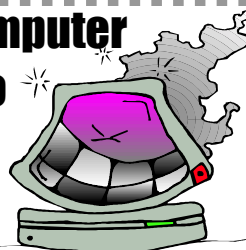
Now for the PT question. Most people who aren't exercising on a regular basis find many barriers including lack of time, lack of facilities (not a problem at the USNA), and disruptions in routine. If these barriers sound familiar consider this. In a recent study published in *JAMA* they discovered that equal health benefits could be obtained by incorporating structured daily fitness regimens or lifestyle changes. These lifestyle changes were tailored to each individual (total of 200 patients).

Some examples included:

1) Walking instead of riding the elevator when confronted with the choice, 2) Hand carrying documents/packages to other departments instead of having others perform these "mundane" tasks, and 3) Parking in the *farthest* spot from the mall entrance. These people showed significant reductions in blood pressure (3-6%) and total cholesterol (10%) while increasing their cardiopulmonary fitness. Obviously, the biggest gains were seen by those who adhered to the regimen. The general take home message is some activity is better than none, more is better than some, until at some point it is possible to do too much. So if you don't exercise regularly, you don't have to join a health club to start!

- LT John Schindler, MD  
Internal Medicine Physician

## Is Your Computer A Hazard to your Health?



After working at the computer for a few hours, do you ever experience any of the following symptoms: tingling sensations in your hands or arms, lower back pain, eyestrain, headaches, shoulder pain or pain in your wrist(s)? Computer work can result in these health problems. Since the emergence of the personal computer, the number of computer-related health problems has escalated. Computer ergonomics is the study of the interaction between the computer user and his/her computer work environment. The following three-part computer safety program was developed to help computer users to reduce their chances of experiencing computer-related health problems.

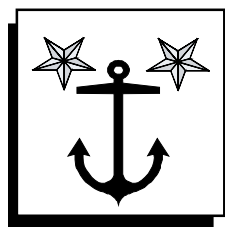
## Part 1: Computer Workstation Design.

The set-up of your computer

workstation can greatly affect your chances of developing computer related health problems. The set-up does not need to include expensive equipment. Be cautious about where you get your advice! All "ergonomic" equipment was not designed by appropriately-trained individuals. Ergonomists with graduate level training are trained to provide sound professional advice to reduce computer-related health problems. Did you know that there are anti glare devices on the market that are designed to fit over your computer monitor and reduce glare and associated eyestrain? Did you also know that some of these devices are quite ineffective? The American Optometric Association (AOA) has established a program to provide evaluation and recognition of quality computer monitor glare reduction filters. Only a few of the anti-glare filters on the market have received the seal of acceptance from AOA.

## Part 2: Computer Workpractices

The way that you type on your keyboard and use a computer mouse can also affect your chances of developing repetitive motion injuries such as Carpel tunnel syndrome and tendinitis. Did you know that many computer users have been diagnosed with tendinitis after increasing their usage of the computer mouse? One of the main recommendations for computer mouse usage is to use the computer mouse with a device called a wrist rest. Unfortunately, many consumers are not trained on how to use these wrist rests. Ergonomists recommend that computer users do not rest their wrists on the wrist rest while they are using the computer mouse since the resulting force can place extra strain on the tendons of the arm. Instead, the computer user should hold his/her



## From the Command Master Chief SHIPMATES in the SPOTLIGHT

**HN Valencio V. Bannister** – General Duty Hospital Corpsman NEC 0000/8404. HN Bannister reported aboard in February 1996 and is currently assigned to the Patient Administration Department. Since arriving on board he has worked in the following areas: Military Medicine, Health Promotions, Preventive Medicine, and Patient Administration. He is currently a qualified Battalion Corpsman. This is his first tour of duty as a Hospital Corpsman and as you can see by his assignments he is an extremely experienced corpsman. His hobbies include working out, drawing, and playing games. He currently resides in the BEQ. HN Bannister's home of record is San Bernardino, California.

**HN Robert B. Boyer** – Pharmacy Technician NEC 8482/8404. HN Boyer reported aboard on 17 January 1999 and is currently working in the Pharmacy. This is his first permanent duty station since joining the Navy in July 1997. HN Boyer is a recent addition to our Command Color Guard. His hobbies include sports, reading (science fiction) and he currently resides in the BEQ. His home of record is Bassett, Virginia.

**HM2(FMF) Sherman E. Fitzgibbon** – General Duty Hospital Corpsman NEC 0000/8404. HM2 Fitzgibbon reported aboard on 2 March 1999 and is currently assigned as the LPO in the Administration Department. He is an experienced corpsman with previous assignments at 1<sup>st</sup> Marine Division Detachment 29 Palms and Naval Air Station, Pensacola. One of his goals is to become a Physician Assistant – he will be attending college to complete his degree and then apply to the Navy's PA Program. His hobbies include fishing, diving, reading, and participating in volunteer activities. He currently resides in Odenton, Maryland. His home of record is Mt Vernon, New York.

*Welcome Aboard Shipmates!*

## Ombudsman Continued ...

any new information to our NMCL family as it becomes available to me. I have always enjoyed helping out our Navy family in any way I can and look forward to the challenge Lynne Towle has left for me.

Lastly, please don't hesitate to contact me if you require any assistance. My husband usually knows where I am if I am not at home. Your questions, comments, concerns, etc. will all be held in the strictest of confidence, within the guidelines defined in OPNAVINST 1750.1D- the Navy Family Ombudsman Instruction. My home phone number is (410) 974-9333, and there is an answering machine in case I miss you. I am available 24 hours a day for emergencies. It wouldn't be NMCL if I didn't include an e-mail address, it is in the works and I will give it to you as soon as it is "on-line" (no pun intended). Thank you again for your time and I hope you and your families enjoy your tour here at the "finest clinic in the United States Navy."

## Computer ... continued

wrist in a neutral position, slightly elevated above the wrist rest. The wrist should not bend up or down or towards the left or towards the right. There are many more recommended computer workpractices.

### Part 3: Medical Management

You should consult a physician and/or an eye doctor, where applicable, if you suspect that you are experiencing computer-related symptoms. Make sure that your physician and eye doctor are familiar with computer-related health problems. For example, there is new technology that will enable your eye doctor to prescribe glasses that are designed for the way in which you read the text on a computer screen. The standard eye exams do not simulate computer screens. In addition to traditional medical treatment, computer users may further reduce their chances of developing computer health problems by performing some simple exercises and massages.

## Force Medical Readiness Goal:

**"We will facilitate force medical readiness of our staff and active duty forces."**

Keeping track of our clinic staff's medical readiness (Readiness Status [R-status] for the entire staff and Training Status [T-status] for platform assigned personnel) is a measure of OUR medical readiness. R-status includes up to date immunizations, Geneva Convention cards, appropriate red dog tags, dependency care plans for some of our staff, health record verification, etc. Similar reports to commanders of units whose medical records we maintain gives them pertinent medical readiness information about their personnel. Other items that impact our staff's medical readiness are limited duty boards, extensive and repetitive light duty recommendations, PRT passes and failures, etc. Our PRT coordinators, Patient Administration personnel, and POMI work diligently to keep this data up to date. Through Directors and Department Heads, a list of R-status items needing updating is being distributed to each of our AD staff.



**This Issue dedicated  
to HMCS John Heaton**

**Sallor  
Teacher  
Mentor  
Friend**

**1932-1999**



Isaac Michael Rosenthal  
6 lbs. 15 oz.  
to  
LT Michael Rosenthal  
January 14, 1999

Brett Levi Wilson  
9 lbs.  
to  
HM2 Jeffrey Wilson  
January 24, 1999

Regan Alexandria Watson  
7 lbs. 1 oz.  
to  
HM3 Jennifer Watson

### **Wanted:**

**Stories, anecdotes, moments,  
recipes, reviews, publishings,  
pictures, ideas, drawings or just  
some feedback for use in upcoming  
issues of the Crier.**

**Submissions can be any length or  
size, preferably electronically sent.  
Just send them to  
[cliniccrier@us.med.navy.mil](mailto:cliniccrier@us.med.navy.mil)**

# **Clinic Happenings**

## **Prevention The Theme At This Year's Health Fair**

Naval Medical Clinic presents it's spring Health Fair May 14 from 1000-1800 ( 10-6p). The Health Fair will showcase different Departments of the Clinic and what each offers. The theme is *prevention*. Several departments will illustrate how they assure and utilize the Put Prevention Into Practice program which focuses on immunizations, screenings, and counseling on topics such as tobacco and alcohol use, responsible sexual practices, stress management, and chronic disease management.

Sheila Adams, massage therapist, will be an added attraction this year. A sign up sheet for a seated massage will be available at her table.

We'll have balloon animals for the kiddies and door prizes for the grown-ups. Come enjoy the fun, have a screening done, and learn something new!

## **Hail and Farewell**

### **Hail to:**

HN Palacios - Physical Exams  
LT Seymour - Comptroller  
HM2 Penny - Physical Exams  
HM2 Reynolds - Radiology  
HN Johnson - Prev Med  
HM3 Wilcox - Orthopedics  
HM3 Armour - Orthopedics

### **Farewell to:**

HM2 Thornton - 3rd FSSG,  
Okinawa  
LCDR Towle & Lynne Towle  
(Ombudsman) - BRC Pearl  
Harbor, HI  
HM3 Wilson - CIVLANT  
LTJG Ball - NNMC Bethesda  
HMC Nieves - CIVLANT

## **Upcoming Events**

<b>Leadership Symposium</b>	<b>May 13 &amp; 27</b>
<b>Nurse Corps Birthday</b>	<b>May 13</b>
<b>Health Fair</b>	<b>May 14</b>
<b>Herndon</b>	<b>May 21</b>
<b>Blue Angels</b>	<b>May 23 &amp; 24</b>
<b>Graduation</b>	<b>May 26 (WED)</b>



## **U.S. Naval Medical Clinic Spring Health Fair**

**14 May 99  
1000 - 1800  
Hospital Point**

**All are invited to join the fun  
and learn about:**

**Losing weight  
Controlling your cholesterol and risk for  
heart attacks  
Foot care  
Eye care  
Battalion Corpsman Program  
Nutrition  
Stress management  
Massage therapy  
Tri-Care enrollment  
Tobacco cessation  
Alcohol abuse  
Chronic back pain  
Tae-bo demonstrations  
Immunizations  
"Putting Prevention Into Practice"  
...and more!**

**For more information on  
taking care of yourself,  
call:  
410 293 1172**